BEST AVAILABLE COPY

POSITION	INITIALS	ID NO.	DATE	
FEE DETERMINATION	KAI	W.	9110	
O.I.P.E. CLASSIFIER	7/1	18011 47	16/2/21	
FORMALITY REVIEW	Sag	827	10-25-00	
RESPONSE FORMALITY REVIEW	Hri	851	03.36 - 0	

INDEX OF CLAIMS

~	Rejected	N	Non-elected
=	Allowed	1	Interference
_	(Through numeral) Canceled	Α	Appeal
÷	Restricted	0	Objected

÷ Hestricted U									
Claim	Date Ci	aim	Date	Claim	Date				
Fine l	Hina a	Original 51		Final Original					
		52		102					
3 7 7		53 54		103					
5		55		104					
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7		57		107					
8		58		108					
10		60		110	- - - - - - - - - - 				
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15		65	 	115					
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718)		68		117					
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21		71		121					
22		72		122					
24		73 74		123					
25		75		125					
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27 28		77 78		127					
29		79		128					
30		80		130					
(31)		81		131					
, 32 , L 33		82 83		132					
34		84		134					
35		85		135					
36	 	86 87		136					
38		88		137					
39		89		139					
40		90		140					
41		91		141					
42 43		92 93	- - - - -	142					
44		94		144					
45		95		145					
46		96	+++	146					
48		97	- - - - -	147	 				
49		99			++++				
50		100		150					

If more than 150 claims or 10 actions staple additional sheet here